## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

UW-VAN den Engh

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
ТО	TAL CLAIMS	<del>-</del>	50				ſ	RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS 50 minus					* -	30		X\$ 9=	270.0	ØR	X\$18=	
INDEPENDENT CLAIMS 5 minus 3 =					*	7	ſ	X40=	80.0	ØВ	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							t	+135=	00	OR	+270=	
* If the difference in column 1 is less than zero, enter "C						olumn 2	L	TOTAL	705°0		TOTAL	
CLAIMS AS AMENDED - PART II							OTHER THA					
		(Column 1)	(Column 2)			(Column 3)		SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	***	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	F (C)   A   1   A	]=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
						,	L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							ADDII. FEE		•	ADDITITEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					· [_]		+135=		OR	+270=	
							L	TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE I		a	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIN		J ∤	.405	<u>.</u>	1		
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2. writ	te "0" in co	olumn 3.	Ĺ	+135= TOTAL		OR	+270= TOTAL	ļ
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

**Application or Docket Number** 

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Effective October 1, 2001

CLAIMS AS FILED - PART I						SMALL ENTITY			ITITY		OTHER THAN	
TOTAL CLAIMS			(Column	1)	(Colu	mn 2)	]	TYPE _		OR	SMALL	
ic	TAL CLAIMS	:						RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	mi	minus 3 = *				X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
If the difference in column 1 is less than zero, enter "0" in co						olumn 2	L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART								'		ı	OTHER	
						(Column 3)		SMALL E		OR	SMALL	
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 67	Minus	** )	50	= 17		X\$ 9=	153.0	OR	X\$18 <b></b> ≑	
AME	Independent	* 7 NTATION OF MI	Minus	· ***	5 T CLAIM	= 2		X42=	84.00	OR	X84=	, !
Ш	rino i Priese	NIATION OF MI	JLI IPLE DEF	ENDEN	CLAIM			+140=		OR	+280=	
							. L	TOTAL ADDIT. FEE	237	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	. 70	Minus	** (0	7	= 3		X\$ 9=	270	OR	X\$18=	
AME	Independent	. 9	Minus	***	7	<u> 2</u>		X42=	84	OR	X84=	157
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						۱ ا	+140=		OR	+280=	
	•						L	TOTAL		OR	TOTAL	
				•			•	ADDIT. FEE		lon	ADDIT. FEE	L
_		(Column 1)			mn 2) IEST	(Column 3)	ı _			1	· · · · ·	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIM	=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	:
. *	that diay in column to look and all column as								•	OR	TOTAL	
***	If the "Highest Nu	mber Previously P	aid For" IN TH	IS SPACE	is less tha	ın 3, enter "3."	•	ADDIT. FEE	propriate bo	J	ADDIT, FEE Jumn 1.	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												